	1. 1034—Revised ibed by here U S 7, 5300 POV Supp. No. 11) lary 20, 1952)												
U. SCOST_REIMBURSABLE (Department, bureau, or establishment) Voucher prepared at(Give place and date) THE UNITED STATES, Dr., Payee's Account No								PAID BY					
								Cucli#1 to					
								SAPC 23666					
								COPY OF 2					
Го		(Pay	ree)			ŕ	-			`*			
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	(Address) (Oity) (State) ARTICLES OR SERVICES						UNIT PRICE		AMOUNT				
No. and Date of Order	ate of Delivery or Service	(Enter description, item	n number of contract or er information deemed r	Federal sup necessary)	pply	QUANTITY	Cost	Per	Dollars	Cti			
		Cost							756	77			
AYMENT:													
Complete													
Partial													
Final	-		nuation sheet(s) if necessar	ry vernment B	/I No	1		Total	756	5 7			
nipped from				vernment B		ee must NO	T use this		150				
I certify that the above bill is correct and just and that payme			t has not been received.		Differences				k is k is graph				
		(Sign original only)							,	1			
		STATINTL		-									
$0_{ate} = 1/14/58$	*Pavee	te not required when a like cer	tificate is made by payer on attached i	bill or bille)						- 1			
		T*:-1.											
Per Contract No. A-1	0.1	Date	Reg. No.			Date		nvoice Rec'o					
		I certify that this account is	correct and proper for pa										
Approved for \$				†		(Authori	zed Certifyi	ng Officer)					
			SIGN ORIGINAL	Title									
зу			ONLY										
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	THE REVERSE OF T	HIS FORM MUST BE EXECUTED WH	EN PURCHASES ARE MADE OR S	ERVICES SECU	RED WITH	OUT WRITTEN !	AGREEMENT I	N ANY FORM					
	ACCOIL	NTING CLASSIFICATION	(Appropriation Symbol r	nust be she	own: oth	er classificat	tion option	al)	4.13				
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Poid by		dated					\payee	named above.	United States in	, 18401			
Cash. \$, on	, 19	Payee			(Sign origina						

Standard Form No. 1035a—Revised Form prescribed by Comptroller General Discoved For Revised September Approved For Revised S

CONTINUATION SHEET

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)		UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts
		Contract A-10/ System IV					
		Direct Costs Properly Chargeable to Contract A-101 for the period 10/28 thru 12/29/57				STATIN	J TL
		Labor for the period 10/28 thru 12/29/57					
STA	ΓINTL	Overhead computed for Control Systems Division at interim rate of	STA	ATINT			
		Total Labor and Overhead				The state of the s	
		G & A expense computed at interim rate of				Oversterning of the Administration	
* 1 1 1 1		STATINTL Total Costs				\$ 75	9. 7
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